

Department of the Secretary of State
Bureau of Corporations, Elections and Commissions
Notary Public Section
101 State House Station
Augusta, ME 04333-0101



Request by Notary Public to Change Name and/or Address

Expiration Date of your Notary Public Commission: _____

Effective date of the change of name and/or address: _____

Current name under which you are authorized to act as a Notary Public:

New name under which you will be authorized to act as a Notary Public:

Signature _____

Current home mailing and physical address: (please provide complete address for both including zip code)

(mailing address)

(physical address, if different from above)

E-mail address: _____

Other language fluency: _____

Current town/city of residence: _____

Date of Birth: _____

Telephone numbers: Home: _____

Work: _____

IF YOU WISH TO RECEIVE A NEW NOTARY PUBLIC CERTIFICATE OF OFFICE SHOWING THE ABOVE CHANGE, PLEASE INCLUDE A COPY OF YOUR CERTIFICATE WITH THIS FORM. If you are filing a change of name, please include a photocopy of the paperwork authorizing the change, such as a marriage certificate or divorce decree.